

STATE: MINNESOTA ATTACHMENT 3.1-A  
Effective: July 1, 2003 Page 54j  
TN: 03-26  
Approved: DEC 19 2003  
Supersedes: 03-10

13.d. Rehabilitative services. (continued)

mental health practitioner under the clinical supervision of a mental health professional. At a minimum, the plan must contain:

- (1) A list of problems identified in the assessment;
- (2) A list of the recipient's strengths and resources;
- (3) Concrete, measurable short-term goals and tasks to be achieved, including time frames for achievement;
- (4) Specific objectives directed toward the achievement of each one of the goals;
- (5) Documentation of the participants involved in the service planning. The recipient, if possible, must participate;
- (6) Planned frequency and type of services initiated;
- (7) The crisis response action plan if a crisis should occur; and
- (8) Clear progress notes on the outcome of goals.

3. Consultation with relatives, guardians, friends, employers, treatment providers, and other significant people, in order to change situations and allow the recipient to function more independently. The consultation must be directed exclusively to the treatment of the recipient.

The services below are not eligible for medical assistance payment as mental health crisis response services:

1. Recipient transportation services.
2. Services provided by a nonenrolled Medicaid provider.
3. Room and board.

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 10 2003  
Supersedes: 03-10

ATTACHMENT 3.1-A  
Page 54k

13.d. Rehabilitative services. (continued)

4. Services provided to a recipient admitted to an inpatient hospital. \_\_\_\_\_
5. Services provided by volunteers.
6. Direct billing of time spent "on call" when not providing services.
7. Provider service time paid as part of case management services.
8. Outreach services, defined on page 54f.

Rehabilitative services provided for **chemical abuse** are limited to:

- (1) **Primary rehabilitation program:** A licensed chemical dependency rehabilitation program that provides intensive, primary therapeutic services to clients who do not require detoxification. Primary rehabilitation programs provide at least 30 hours a week per client of chemical dependency services including group and individual counseling, and other services specific to chemical dependency rehabilitation.
- (2) **Outpatient rehabilitation program:** A program of at least 10 hours of therapy/counseling, including group, collateral, and individual therapy/counseling and may be provided to a recipient while the recipient resides in a supervised living facility, board and lodging facility, or the recipient's own home.
- (3) **Extended rehabilitation program:** A licensed chemical dependency rehabilitation program that offers extended, long term in-house chemical dependency services. An extended rehabilitation program provides an average of 15 hours a week per client of chemical dependency services including group and individual counseling, client education, and other services specific to chemical dependency rehabilitation.

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 10 2003  
Supersedes: 03-10

ATTACHMENT 3.1-A  
Page 541

13.d. Rehabilitative services. (continued)

- (4) **Transitional rehabilitation program:** A licensed chemical dependency rehabilitation program that is offered in a transitional semi-independent living arrangement with an emphasis on aftercare and securing employment. A transitional rehabilitation program provides at least five hours a week per client of rehabilitation services that may include group counseling, employment counseling, and individual counseling.

Collateral counseling involves counseling provided directly or indirectly to the recipient through the involvement of the recipient's or significant others in the counseling process. Presence of the recipient in the counseling sessions is not necessarily required. However, when the recipient is present, reimbursement for collateral counseling and individual or group counseling for the same session is not allowed.

Rehabilitative services must be restorative or specialized maintenance therapy services and include medical treatment and physical or psychological therapy. These services are limited to services provided under the recommendation of a physician and must be a part of the recipient's plan of care.

Provider eligibility is limited to programs licensed by the Department of Human Services under Minnesota Rules, parts 9530.4100 through 9530.4450 (Rule 35) and Minnesota Rules, parts 9530.5000 through 9530.6400 (Rule 43) or the American Indian programs, that if located outside of the federally recognized tribal lands would be required to be licensed.

**Rehabilitative restorative and specialized maintenance physical therapy, occupational therapy, and speech, language and hearing therapy services.**

Coverage is limited to services within the limitations provided under Items 11.a. to 11.c., Physical therapy services, Occupational therapy services, and Speech, language and hearing therapy services (provided by or under the supervision of a speech pathologist or audiologist), except:

- (1) Services that are provided by a rehabilitation agency that take place in a sheltered workshop in a day training and habilitation center or a residential or group home that is an

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 19 2003  
Supersedes: 03-10

ATTACHMENT 3.1-A  
Page 54m

13.d. Rehabilitative services. (continued)

affiliate of the rehabilitation agency are not covered.

(2) Social and vocational adjustment services are not covered, but must be provided as an unreimbursed adjunct to the covered services.

Covered **respiratory therapy services** are those prescribed by a physician and provided by a qualified respiratory therapist.

**EPSDT rehabilitative services identified in either an Individualized Family Service Plan or an Individualized Education Plan under the Individuals with Disabilities Education Act (IDEA)** and provided to children with IFSPs or IEPs during the school day.

Covered services include: IFSP or IEP evaluations that are medical in nature and result in IFSPs or IEPs, or determine the need for continued services; speech, language and hearing therapy services; mental health services; physical and occupational therapy; and assistive technology devices.

Covered services also include nursing services, such as catheterization, suctioning, tube feedings, medication management, and ventilator care. Nursing services also includes complex or simple medication administration. Medication administration must be related to a child's disability and included in an IFSP or IEP for treatment of the identified disability.

- Simple medication administration is an exception to the requirement in the following paragraph that EPSDT rehabilitative services identified in an IFSP or IEP must be services otherwise covered in this Attachment.

The services must meet all the requirements otherwise applicable if the service had been provided by a qualified, enrolled provider other than a school district, in the following areas: a covered service, medical necessity, documentation, personnel qualifications, and invoicing and prior authorization requirements.

Appropriate nursing services must be provided pursuant to a physician's order. All other services must be provided pursuant to an order of a licensed practitioner of the healing arts.

Covered services must be furnished by the following personnel:

- (1) Audiologists meeting the requirements in 42 CFR Part 440.110.

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 19 2003  
Supersedes: 03-10

ATTACHMENT 3.1-A  
Page 54n

13.d. Rehabilitative services. (continued)

- (2) Occupational therapists certified by the National Board for Certification in Occupational Therapy who maintain state licensure as occupational therapists.
- (3) Physical therapists meeting the requirements in 42 CFR Part 440.110.
- (4) Speech-language pathologists:
  - (a) meeting the requirements in 42 CFR Part 440.110;
  - (b) who hold a masters degree in speech-language pathology; and
  - (c) who are licensed by the state as speech-language pathologists.
- (5) Mental health professionals as defined in item 6.d.A.
- (6) Mental health practitioners practicing under the supervision of mental health professionals who:
  - (a) hold a bachelor's degree in one of the behavioral sciences or related fields from an accredited college or university and have at least 2,000 hours of supervised experience in the delivery of mental health services to children;
  - (b) have at least 6,000 hours of supervised experience in the delivery of mental health services to children;
  - (c) are graduate students in one of the behavioral sciences or related fields and are formally assigned by an accredited college or university to an agency or facility for clinical training; or
  - (d) hold a master's or other graduate degree in one of the behavioral sciences or related fields from an accredited college or university and have less than 4,000 hours post-master's experience in the treatment of emotional disturbance.

Mental health practitioners cannot provide psychological testing or diagnostic assessments.

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26 DEC 1 9 2003  
Approved:  
Supersedes: 03-10

ATTACHMENT 3.1-A  
Page 54o

13.d. Rehabilitative services. (continued)

- (7) Mental health behavioral aides as defined in item 4.b., page 17p working under the direction of either mental health professionals or mental health practitioners under the clinical supervision of mental health professionals.
- (8) Physicians who have a current Minnesota license as a physician.
- (9) Registered nurses and licensed practical nurses who have a current Minnesota license as registered nurses or practical nurses.

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 19 2003  
Supersedes: 03-10

ATTACHMENT 3.1-B  
Page 53

13.d. Rehabilitative services.

**Rehabilitative services** are limited to:

- (1) Except as otherwise noted, services provided under the recommendation of a physician. The therapeutic treatment must be a part of the recipient's plan of care; and
- (2) Services that are medically necessary and the least expensive, appropriate alternative.

**Mental health rehabilitative services** are the following:

• **Community mental health center (CMHC) services** provided by a facility that meets the requirements of Minnesota Statutes, §256B.0625, subdivision 5.

The CMHC must be licensed under Minnesota Rules, parts 9520.0750 to 9520.0870 to provide mental health services under the clinical supervision of a mental health professional who is licensed for independent practice at the doctoral level, or by a board-certified psychiatrist, or a psychiatrist who is eligible for board certification. A CMHC's mental health team includes at least a:

1. licensed physician who has completed an approved residency program in psychiatry;
2. doctoral clinical, counseling or health care psychologist; and
3. clinical social worker with a master's degree in social work from an accredited college or university and/or a clinical psychiatric nurse with a master's degree in psychiatric nursing or a related psychiatric nursing program from an accredited college or university.

As needed, the mental health team may also consist of other professionals, paraprofessionals and disciplines. Staff qualifications are consistent with the specific service listed, below.

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 19 2003  
Supersedes: 03-10

ATTACHMENT 3.1-B  
Page 53a

13.d. Rehabilitative services. (continued)

CMHC services are furnished by a private nonprofit corporation or a governmental agency that has a community board of directors. Providers must be capable of providing the services to recipients who are diagnosed with both mental illness or emotional disturbance and chemical dependency, and to recipients dually diagnosed with a mental illness or emotional disturbance and mental retardation or a related condition.

The following are included in the **CMHC services** payment:

1. Diagnostic assessment
2. Explanation of findings
3. Family, group and individual psychotherapy, including crisis intervention psychotherapy services, multiple family group psychotherapy, psychological testing, and medication management
4. Day treatment services
5. Professional home-based mental health services
6. For Medicare-certified centers, partial hospitalization for mental illness, as defined at §1861(ff) of the Act.

Authorization is required for the following conditions:

- A. Services provided for more than 21 days.
- B. Services within 45 days of the last day a recipient received services.
- C. For a recipient under age 18, less than three hours of covered services per day.
- D. For a recipient at least age 18, less than five hours of covered services per day.

The provider must provide 24-hour emergency care or demonstrate the capacity to assist recipients in need of such services on a 24-hour basis.

- Coverage of **day treatment services for mental illness** is limited to:
  1. Services recommended by a psychiatrist, licensed psychologist, licensed independent clinical social worker, registered nurse with certification as a clinical nurse specialist in psychiatric and mental health nursing or a master's degree in nursing or one of the behavioral sciences or related fields, with at least



STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 19 2003  
Supersedes: 03-10

ATTACHMENT 3.1-B  
Page 53b

13.d. Rehabilitative services. (continued)

4,000 hours of post-master's supervised experience; licensed psychological practitioner; or licensed marriage and family therapist with at least two years of post-master's supervised experience.

2. Services supervised by an enrolled psychiatrist or other mental health professional listed in item 6.d.A.

3. Services provided in or by one of the following:

A. Joint Commission on the Accreditation of Healthcare Organizations approved outpatient hospital;

B. Community Mental Health Center;

C. County contracted day treatment provider.

4. Services provided up to 15 hours per week.

- **Mental health community support services** are recommended by a mental health professional defined in item 6.d.A. after a diagnostic assessment and a functional assessment. They are provided pursuant to an individual treatment plan, written by a mental health professional or by a mental health practitioner defined on page 53n under the clinical supervision of a mental health professional.

The services are provided on a one-to-one basis or in a group in a recipient's home, a relative's home, school, place of employment, or other community setting.

The following are eligible to provide mental health community support services:

1. An entity certified by the Department and operated by a county.
2. An entity certified by ~~its~~ the Department based on a review and recommendation by the host county.

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 11 2003  
Supersedes: 03-10

ATTACHMENT 3.1-B  
Page 53c

13.d. Rehabilitative services. (continued)

3. A facility of the Indian Health Service or a facility owned or operated by a tribe or tribal organization and funded by either Title I of the Indian Self-Determination and Education Assistance Act, P.L. 93-638, as amended, or Title V of the Indian Self-Determination and Education Assistance Act, P.L. 106-260 (~~formerly Title III of P.L. 93-638~~), operating as a 638 facility.

Provider Qualifications and Training

1. A mental health practitioner must receive ongoing continuing education training as required by the practitioner's professional license; or, if not licensed, a mental health practitioner must receive ongoing continuing education training of at least 30 hours every two years in areas of mental illness and mental health services.
2. A mental health rehabilitation worker must:
  - A. Be at least 21 years of age;
  - B. Have a high school diploma or equivalent;
  - C. Have successfully completed 30 hours of training during the past two years covering recipient rights, recipient-centered individual treatment planning, behavioral terminology, mental illness, co-occurring mental illness and substance abuse, psychotropic medications and side effects, functional assessment, local community resources, adult vulnerability, and recipient confidentiality; and \_\_\_\_\_
  - D. Meet the qualifications in (1) or (2) below:
    - (1) Have an associate of arts degree in one of the behavioral sciences or human services, be a registered nurse without a bachelor's degree, or within the previous ten years:
      - (a) Have three years of personal life experience with serious and persistent mental illness;

STATE: MINNESOTA  
Effective: July 1, 2003  
TN: 03-26  
Approved: DEC 19 2003  
Supersedes: 03-10

ATTACHMENT 3.1-B  
Page 53d

13.d. Rehabilitative services. (continued)

- (b) Have three years of life experience as a primary caregiver to a person with a serious mental illness or traumatic brain injury; or
- (c) Have 4,000 hours of supervised paid work experience in the delivery of mental health services to persons with serious mental illness or traumatic brain injury; or
- (2) (a) Be fluent in the language or competent in the culture of the ethnic group to which at least ~~50~~ 20 percent of the mental health rehabilitation worker's clients belong;
- (b) Receive monthly individual clinical supervision by a mental health professional during the first 2,000 hours of work. Supervision must be documented;
- (c) Have 18 hours of documented field supervision by a mental health professional or mental health practitioner during the first 160 hours of contact work with recipients and at least six hours of field supervision quarterly during the following year;
- (d) Have review and cosignature of charting of recipient contacts during field supervision by a mental health professional or mental health practitioner; and
- (e) Have 40 hours of additional continuing education on mental health topics during the first year of employment.